

\$365.00

TOTAL AMOUNT OF PAYMENT

Docket No.	3802-017-27 CONT	1/1
Serial No.	09/610,891	29
Filing Date	July 6, 2000	VIII <003
Inventor(s)	James McARTHUR et al.	1/60
Group Art Unit	1642	00/200
Examiner	Misook Yu	1900

30,073

48,328

Telephone

202-861-3900

Registration No.

Registration No.

July 24, 2003

Date

Applicant claims small entity status.								FEE CALCULATION (continued)								
Charge any <u>UNDERPAYMENT</u> or credit any <u>OVERPAYMENT</u> in the indicated fees to Deposit Account No. 50-1442.											3. ADDITIONAL FEES					
☐ Charge the indicated fees to Deposit Account No. 50-1442.											Large Entity Small Entity			Entity	Fee Description	
2. ■ Check enclosed.										Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Paid	
FEE CALCULATION								1051	130	2051	65	Surcharge-late filing fee or oath				
1. BASIC FILING FEE									1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet			
Large Entity Small Entity					Fe	e Descrip	tion				1053	130	1053	130	Non-English specification	
Fee Code	Fee (\$)	Fee Code		Fee (\$)				Fee Paid	1812	2520	1812	2520	Ex parte reexam. fee			
1001	750	2001		375	Utility filing fee					1251	110	2251	55	1-mo. ext. of time		
1002	330	2002		165	Design filing fee					1252	410	2252	205	2-mo. ext. of time	205	
1003	520	2003		260	Plant filing fee					1253	930	2253	465	3-mo. ext. of time		
1004	750	2004		375	Reissue filing fee				Т		1254	1450	2254	725	4-mo. ext. of time	
1005	160	2005		80	Provisional filing fee				T		1255	1970	2255	985	5-mo. ext. of time	
SUBTOTAL (1) \$0.00								1401	320	2401	160	Notice of Appeal	160			
2. E	XTRA	CLAIM F	EES	;							1402	320	2402	160	Appeal Brief	
tot. claims			-	20*	=	0	x	\$9	11	0	1403	280	2403	140	Request for Oral Hearing	
ind. c	laims		-	3*	=	0	x	\$42	=	0	1501	1300	2501	650	Utility/Reissue Issue Fee	
□ Multiple Dependent Claims \$140 =								1502	470	2502	235	Design Issue Fee				
Large Entity Small Entity Fee Description							1503	630	2503	315	Plant Issue Fee					
Fee Code	Fee (\$)	Fee Code		Fee (\$)							1460	130	1460	130	Petitions to the Commissioner	
1202	18	2202		9	Claims in excess of 20						1806	180	1806	180	IDS Submission	
1201	84	2201		42	Independent claims in excess of 3						8021	40	8021	40	Assignment	
1203	280	2203		140	Multiple dependent claim, if not paid						1801	750	2801	375	For Filing RCE	
1204	84	2204		42	*Reissue independent claims over original patent						1802	900	1802	900	Expedited Design	
1205	18	2205		9	*Reissue claims in excess of 20 and over original patent						OTHER (indicate below):					
						SUB	то	TAL (2)	Π	\$0.00						
						ies, see a					<del>                                     </del>	1	1	·	SUBTOTAL (3)	\$365.00

Name

Name

Signature

Steven B. Kelber

Ping Wang, M.D.